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REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS

Application Number	09/095,323
Filing Date	June 10, 1998
First Named Inventor	Michael D. LAUFER
Art Unit	3735
Examiner Name	David M. Shay
Attorney Docket Number	ASTXNA00100

P.O.	nissioner fo 3ox 1450 Indria, VA 22								
Please withdraw me as attorney or agent for the above identified patent application, and									
all the attorneys/agents of record.									
the attorneys/agerits (with registration numbers) listed on the attached paper(s), or									
	the attorneys/agents associated with Customer Number				40518				
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.									
The reasons for this request are: Per the request of the Assignee, the above application is to be transferred to Perkins Cole LLP.									
CORRESPONDENCE ADDRESS									
The correspondence address is NOT affected by this withdrawal.									
2. Change the correspondence address and direct all future correspondence to:									
The address associated with Customer Number:									
OR									
	n or ividual Name	Paul T. Parker Perkins Coie LLP							
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Signature	5	5 675	AP 1						
Name Sanjay's Bagado					Registration No. 42,280				
Date November 18, 2007 Telephone No. (650) 242-4210									

date of a time period for resoonse or cossible extension period, the request to withdraw is normally disapproved

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application, Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete. including gathering, presoning, and submitting the completed application form to the USPTO. Time will vary depending upon the endividual case, Any comments on the amount of time you require to complete his form and/or suggestions for reducing his branch, should be sent but End of his formal his form and/or suggestions for reducing his branch is, should be sent but End of his formal his form of the purpose of the his formal hi ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.